

### ***Description and Location of Work***

**INSPECTOR'S DAILY RECORD  
OF  
CONSTRUCTION OPERATIONS**

Project \_\_\_\_\_

Contractor/Subcontractor\_\_\_\_\_

Date \_\_\_\_\_

Shift \_\_\_\_\_ To \_\_\_\_\_

Weather/Temp. \_\_\_\_\_

A \_\_\_\_\_

B \_\_\_\_\_

C \_\_\_\_\_

D \_\_\_\_\_

E \_\_\_\_\_

F \_\_\_\_\_

G \_\_\_\_\_

H \_\_\_\_\_

[illegible]

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Contractor/Subcontractor \_\_\_\_\_

Date \_\_\_\_\_

Shift \_\_\_\_\_ To \_\_\_\_\_

Weather/Temp. \_\_\_\_\_

A \_\_\_\_\_

B \_\_\_\_\_

C \_\_\_\_\_

D \_\_\_\_\_

E \_\_\_\_\_

G \_\_\_\_\_

[illegible]

\* B = Broken Down, W = No Available Work, P = No Operator, S = Suspended

Traffic Control Checked  
Erosion Control Checked  
Unsafe Operations

☐  
☐  
☐

YES  
YES  
YES

☐  
☐  
☐

NO  
NO  
NO

Traffic Control Problems  
Erosion Control Problems  
Accidents

☐  
☐  
☐

YES  
YES  
YES

☐  
☐  
☐

NO  
NO  
NO

**NARRATIVE REPORT: *Descriptions, Problems, Visitors, Materials Received, etc.***

**It is hereby certified that the information contained in this record is accurate, and that all work documented herein complies with the requirements of the contract. Any exceptions to this certification are documented as a part of this record.**

ITEM NO.	DESCRIPTION	LOCATION - STATIONS	QTY.	REMARKS

REVIEWED BY		REPORTED BY	
SIGNATURE ( <i>Project Engineer</i> )	DATE	SIGNATURE ( <i>Inspector</i> )	DATE